



<b><i>Index of Claims</i></b>  	<b>Application/Control No.</b>  09784707	<b>Applicant(s)/Patent Under Reexamination</b>  BASTIOLI ET AL.
	<b>Examiner</b>  Victor S Chang	<b>Art Unit</b>  1771

✓	<b>Rejected</b>	-	<b>Cancelled</b>	N	<b>Non-Elected</b>	A	<b>Appeal</b>
=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant					<input type="checkbox"/> CPA					<input type="checkbox"/> T.D.					<input type="checkbox"/> R.1.47				
CLAIM		DATE																	
Final	Original	09/05/2007	03/25/2008	12/14/2008															
	1	✓	✓	✓															
	2	✓	✓	✓															
	3	✓	✓	✓															
	4	✓	✓	✓															
	5	-	-	-															
	6	-	-	-															
	7	✓	✓	✓															
	8	✓	✓	✓															
	9	-	-	-															
	10	✓	✓	✓															
	11	✓	✓	✓															
	12	✓	✓	✓															
	13	✓	✓	✓															
	14	✓	✓	✓															
	15	✓	✓	✓															
	16	✓	✓	✓															
	17	✓	✓	✓															
	18	✓	✓	✓															
	19	✓	✓	✓															
	20	✓	✓	✓															
	21	✓	✓	✓															
	22	✓	✓	✓															
	23	✓	✓	✓															
	24	✓	✓	✓															
	25	✓	✓	✓															
	26	✓	✓	✓															
	27	✓	✓	✓															
	28	✓	✓	✓															
	29	✓	✓	✓															
	30	✓	✓	✓															
	31	✓	✓	✓															
	32	✓	✓	✓															
	33	-	-	-															
	34	-	-	-															
	35	-	-	-															
	36	-	-	-															

<p align="center"><b><i>Index of Claims</i></b></p> 	<b>Application/Control No.</b> 09784707	<b>Applicant(s)/Patent Under Reexamination</b> BASTIOLI ET AL.
	<b>Examiner</b> Victor S Chang	<b>Art Unit</b> 1771

✓	<b>Rejected</b>	-	<b>Cancelled</b>	N	<b>Non-Elected</b>	A	<b>Appeal</b>
=	<b>Allowed</b>	÷	<b>Restricted</b>	I	<b>Interference</b>	O	<b>Objected</b>

<input type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b>		<input type="checkbox"/> <b>CPA</b>		<input type="checkbox"/> <b>T.D.</b>		<input type="checkbox"/> <b>R.1.47</b>			
CLAIM		DATE							
Final	Original	09/05/2007	03/25/2008	12/14/2008					
	37	-	-	-					
	38	-	-	-					
	39	✓	✓	✓					
	40	✓	✓	✓					
	41	-	-	-					
	42	-	-	-					
	43	-	-	-					
	44	-	-	-					
	45	-	-	-					
	46	N	N	N					
	47	✓	✓	N					
	48	✓	✓	N					
	49	✓	✓	N					
	50	N	N	N					
	51	✓	✓	✓					